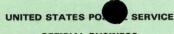
IB DOGM	M/-015/072	10/21/96
3 and 4. Put your address in the card from being returne to and the date of deliver for fees and check box	d to you. The return receipt fee will	prese side. Failure to definis will prevent this provide you the name of the person delivered and services are available. Consult postmaster asted.
3. Article Addressed		4. Article Number
NEAL J MORTE WESTERN CLAY PO BOX 127 AURORA UT 8		P 074 976 557 Type of Service: Registered Insured Cod Cod Cod Return Receipt for Merchandise
		Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Addre	ss S	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent		
7. Date of Delivery	54 196 1 111	

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT



OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



RETURN

TO



Print Sender's name, address, and ZIP Code in the space below.

Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801

built Built Gity, Gian Gill Ggg

P 074 976 557

B

M/015/072

10/21/96

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

NOT FOR INTERNATIONAL MAI	L		
(See Reverse)			
Sent to NEAL J MORTENSEN WESTERN CLAY CO			
Street and No.	0		
PO BOX 127			
*P.O., State and ZIP Code	2 7.44		
AURORA UT 84620			
Postage	S '		
Certified Fee			
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt showing to whom and Date Delivered			
Return Receipt sabwing to whom, Date, and Address of Delivery			
TOTAL Figage and reas	2.98		
Postmark of tate of			
921440			

PS Form 3800, June 1985